

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. COU-0010	
Applicant(s): MICHAEL L. WHITEHEAD ET AL.				
Application No. 10/828,745	Filing Date 4/21/2004	Examiner GREGORY ISSING	Group Art Unit 3662	
Invention: METHOD AND SYSTEM FOR SATELLITE BASED PHASE MEASUREMENTS FOR RELATIVE POSITIONING OF FIXED OR SLOW MOVING POINTS IN CLOSE PROXIMITY				
<p>I hereby certify that this <u>Amendment Transmittal (1) page and Preliminary Amendment (10) pages</u> is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703-873-9306) on <u>NOVEMBER 29, 2004</u> (Date)</p>				
RECEIVED CENTRAL FAX CENTER NOV 29 2004		NOELLE T. ERICKSON (Typed or Printed Name of Person Signing Certificate) <i>Noelle T. Erickson</i> (Signature)		
		Note: Each paper must have its own certificate of mailing.		

BEST AVAILABLE COPY

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. COU-0010	
Applicant(s): MICHAEL L. WHITEHEAD ET AL.						
Application No. 10/828,745	Filing Date 4/21/2004	Examiner GREGORY ISSING	Customer No. 23413	Group Art Unit 3662	Confirmation No. 3487	
Invention: METHOD AND SYSTEM FOR SATELLITE BASED PHASE MEASUREMENTS FOR RELATIVE POSITIONING OF FIXED OR SLOW MOVING POINTS IN CLOSE PROXIMITY						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	30	20	10	\$9.00	\$90.00	
INDEP. CLAIMS	6	6	1	\$44.00	\$44.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						
\$134.00						
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 06-1130 In the amount of \$134.00 <input checked="" type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1130 <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card, Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
Dated: NOVEMBER 29, 2004 _____ Signature						
Troy J. LaMontagne Registration No. 47,239 Cantor Colburn LLP 25 Grille Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Customer No. 23413						
I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22303-1450" (37 CFR 1.5(e)) on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence						

RECEIVED
CENTRAL FAX CENTER
NOV 29 2004

COU-0010

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: MICHAEL L. WHITEHEAD ET AL.)
Serial No: 10/828,745) Group Art Unit: 3662
Filed: APRIL 21, 2004) Examiner: G. ISSING
For: METHOD AND SYSTEM FOR SATELLITE) Confirmation No. 5487
BASED PHASE MEASUREMENTS FOR)
RELATIVE POSITIONING OF FIXED OR)
SLOW MOVING POINTS IN CLOSE)
PROXIMITY)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Prior to examination of this application, please make the following amendments:

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

☐ **BLACK BORDERS**

☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**

☒ **FADED TEXT OR DRAWING**

☒ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**

☐ **SKEWED/SLANTED IMAGES**

☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**

☐ **GRAY SCALE DOCUMENTS**

☒ **LINES OR MARKS ON ORIGINAL DOCUMENT**

☒ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**

☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.